

# FAMILY RISK ASSESSMENT OF ABUSE/NEGLECT

PS Case Name: \_\_\_\_\_

PS Case Number: \_\_\_\_\_

Load Number: \_\_\_\_\_

Assessment Date: \_\_\_\_\_

NEGLECT		Score	ABUSE		Score
N1.	Current complaint and/or finding is for neglect		A1.	Current complaint and/or finding includes mental injury	
	A. No.....	0		A. No.....	0
	B. Yes.....	2		B. Yes.....	1
N2.	Number of prior assigned neglect complaints and/or findings		A2.	Number of prior assigned abuse complaints and/or finding	
	A. One or less.....	0		A. None.....	-1
	B. Two or more.....	2		B. One or two.....	0
				C. Three or more.....	1
N3.	Number of children in the household		A3.	Age of youngest child	
	A. Three or less.....	0		A. Seven years or older.....	0
	B. Four or more.....	1		B. Six years or younger.....	1
N4.	Primary caretaker's social support		A4.	Number of children in the home	
	A. Appropriate and available social support.....	0		A. Two or less.....	0
	b. Limited or negative support ( <i>check all that apply</i> )			B. Three or more.....	2
	<input type="checkbox"/> No or limited social support from relatives				
	/friends/neighbors.....	1	A5.	Either caretaker was abused and/or neglected as a child	
	<input type="checkbox"/> Relatives/friends/neighbors have negative			A. No.....	0
	impact.....	1		B. Yes.....	2
N5.	Primary caretaker is unable/unwilling to control impulses		A6.	Secondary caretaker has low self-esteem	
	A. No.....	0		A. <input type="checkbox"/> No secondary caretaker ( <i>check if applicable</i> )	
	B. Yes.....	1		<input type="checkbox"/> No.....	0
N6.	Primary caretaker provides inadequate physical care and/or inadequate supervision of child(ren)			B. Yes.....	1
	A. No.....	0	A7.	Either caretaker is domineering, and/or employs excessive and/or inappropriate discipline	
	B. Yes ( <i>check all that apply</i> )			A. No, neither caretaker.....	0
	<input type="checkbox"/> Provides inadequate physical care			B. Yes ( <i>check all that apply</i> )	
	<input type="checkbox"/> Provides inadequate supervision of child.....	1		<input type="checkbox"/> Domineering	
N7.	Primary caretaker currently has a mental health problem			<input type="checkbox"/> Inappropriate discipline.....	1
	A. No.....	0	A8.	Either caretaker has current or a history of domestic violence	
	B. Yes.....	1		A. No, neither caretaker.....	0
N8.	Primary caretaker involved in harmful relationships			B. Yes.....	1
	A. No.....	0	A9.	A child in the household has one or more of the following characteristics	
	B. Harmful relationships or one domestic violent incident.....	1		A. No characteristics below are present.....	0
	C. Two or more domestic violence incidents.....	2		B. Yes ( <i>check all that apply and indicate highest score</i> )	
N9.	Primary caretaker currently has a substance abuse problem			<input type="checkbox"/> Developmental disability.....	1
	A. No.....	0		<input type="checkbox"/> History of delinquency.....	1
	B. Yes.....	1		<input type="checkbox"/> Mental health issue.....	2
				<input type="checkbox"/> Behavioral issue.....	2
N10.	Family is homeless or children are unsafe due to housing conditions		A10.	All caretakers are motivated to improve parenting skills	
	A. No.....	0		A. Yes, all caretakers motivated or improvement not needed.....	-1
	B. Yes ( <i>check all that apply</i> )			B. Yes, caretakers are willing to participate.....	-1
	<input type="checkbox"/> Family is homeless			C. No, one or both caretakers needs to improve parenting skills but will not participate.....	0
	<input type="checkbox"/> Housing is physically unsafe.....	2	A11.	Primary caretaker views incident less seriously than agency	
N11.	Primary caretaker able to put child needs ahead of own			A. No.....	0
	A. Yes.....	0		B. Yes, views incident less seriously.....	1
	B. No.....	1			

**TOTAL NEGLECT RISK SCORE**

**TOTAL ABUSE RISK SCORE**

**SCORED RISK LEVEL.** Assign the family's scored risk level based on the highest score of the neglect or abuse assessments, using the following:

Neglect Score	Abuse Score	Risk Level
<input type="checkbox"/> 0 - 2	<input type="checkbox"/> -2 - 0	<input type="checkbox"/> Low
<input type="checkbox"/> 3 - 6	<input type="checkbox"/> 1 - 3	<input type="checkbox"/> Moderate
<input type="checkbox"/> 7 - 9	<input type="checkbox"/> 4 - 6	<input type="checkbox"/> High
<input type="checkbox"/> 10 +	<input type="checkbox"/> 7 +	<input type="checkbox"/> Intensive

**POLICY/DISCRETIONARY OVERRIDES.**